

A. Days Served _____	C. Average Daily Attendance _____	E. Highest # of Eligible Free approved during the month _____	*
B. Enrollment _____	D. Attendance Factor (C ÷ B) _____	F. Highest # of Eligible Reduced approved during the month _____	*
		G. Highest # of Eligible Paid approved during the month _____	*

Attendance Factor (D)		Highest # of Students Approved for the Month		Attendance Adjusted Eligible	
_____	X	_____ (E)	=	_____	(H) <sup>+</sup>
_____	X	_____ (F)	=	_____	(I) <sup>+</sup>
_____	X	_____ (G)	=	_____	(J) <sup>+</sup>

The number of meals claimed by category **CANNOT** exceed the figures reported on lines E, F or G on any given day. If the number of meals claimed by category exceeds the figures on lines H, I or J on any given day, those meal counts **MUST** be circled above and the reason for the discrepancy **MUST** be documented either at the bottom or on the back of this page.

\*Students who change categories during the month should be included in both categories.  
*Retain this record at school for three years.* Nebraska Department of Education – Nutrition Services